Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF WASHINGTON	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Amanda	
		r government-issued ure identification (for	First name	First name
	exa	mple, your driver's	E.	
	licer	nse or passport).	Middle name	Middle name
		g your picture	Gilchrist	
		tification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-9844	

Official Form 101 Case 19-43780-MJH DOC 1 Filed 11/25/19 Ent. 11/25/19 12:03:37 Pg. 1 of 53

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	717 Tacoma Ave. S #E	If Debtor 2 lives at a different address:
		Tacoma, WA 98402  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Pierce	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

8.	How you will pay the fee	;	about how yo order. If your	the entire fee when I file my petition. Please check with the clerk's office in your local court for more de you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mour attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check					
			order. If your a pre-printed		itting your payment on your beha	alf, your attorney may pay with a credit card or check wit			
			I need to pay	pay the fee in installments. If you choose this option, sign and attach the Application for Individual Fee in Installments (Official Form 103A).					
			I request that but is not req applies to you	at my fee be wai juired to, waive your family size and	wed (You may request this option our fee, and may do so only if you I you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may ur income is less than 150% of the official poverty line the installments). If you choose this option, you must fill ou ial Form 103B) and file it with your petition.			
).	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes	3.						
			District		When	Case number			
			District	-	When	Case number			
			District		When	Case number			
   <b>0</b> .	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
	Do you rent your	□ No.	Go to [	line 12.					
 I1.	residence?	■ Yes			ned an eviction judgment against	t vou?			
11.		V	s. 1100 yc			. you.			
11.		- 168							
11.		<b>—</b> 163		No. Go to line 1		ludgment Against You (Form 101A) and file it with this			

Case number (if known)

Debtor 1 Amanda E. Gilchrist

art	3: Report About Any Bu	sinesses	You Own as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
	business:	☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a	<b>—</b> 103.		
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check the appropriate be	ox to describe your business:
			☐ Health Care Busi	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	ve
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	ram not ming under ona	рен п.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
art	4: Report if You Own or	Have Any	/ Hazardous Property or Ar	ny Property That Needs Immediate Attention
	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	агусти герапо!			Number, Street, City, State & Zip Code

Debtor 1 Amanda E. Gilchrist

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101 Case 19-43780-MJH DOC 1 Filed 11/25/19 Ent. 11/25/19 12:03:37 Pg. 5 of 53

Deb	otor 1 Amanda E. Gilchri	st		Case number	(if known)
Par	t 6: Answer These Questi	ons for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily consumindividual primarily for a personal		ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ess debts? Business debts are debts t ent or through the operation of the busin	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe t	that are not consumer debts or business	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.		ou estimate that after any exempt prope ole to distribute to unsecured creditors?	erty is excluded and administrative expenses
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes		
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities to be?	<b>\$100,0</b>	50,000 101 - \$100,000 1001 - \$500,000 1001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have ex	amined this petition, and I declare	under penalty of perjury that the inform	nation provided is true and correct.
				m aware that I may proceed, if eligible, available under each chapter, and I cho	under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
				pay or agree to pay someone who is not otice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this
		I request	relief in accordance with the chap	ter of title 11, United States Code, spec	ified in this petition.
		bankrupto and 3571	cy case can result in fines up to \$2	ncealing property, or obtaining money or 250,000, or imprisonment for up to 20 ye	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Amanda	a E. Gilchrist e of Debtor 1	Signature of Debtor	2
		Executed	November 19, 2019  MM / DD / YYYY	Executed on MM	/ DD / YYYY

Debtor 1	Amanda E. Gilchrist	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Tom S. Hyde	Date	November 19, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Tom S. Hyde 20509		
Printed name		
LAW OFFICES OF TOM S. HYDE		
Firm name		
1119 PACIFIC AVENUE		
SUITE 1204		
TACOMA, WA 98402		
Number, Street, City, State & ZIP Code		
Contact phone (253) 472-4448; (425) 339-8000	Email address	wiceverett@comcast.net
20509 WA		
Bar number & State		

E:II :-	this information to identify your con-		
	this information to identify your case:		
Debte	Amanda E. Gilchrist First Name Middle Na	ame Last Name	
Debte	or 2 se if, filing) First Name Middle Na	ame Last Name	
		DISTRICT OF WASHINGTON	
(if know	number wn)		☐ Check if this is an amended filing
	cial Form 106Sum	lities and Certain Statistical Information	12/15
		ried people are filing together, both are equally responsible fo	
inforn		complete the information on this form. If you are filing amende	
Part '	Summarize Your Assets		
			Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	A/B	\$ 0.00
	•	nedule A/B	·
			\$18,709.16
	1c. Copy line 63, Total of all property on Schedule	A/B	\$ 18,709.16
Part 2	2: Summarize Your Liabilities		
			Your liabilities Amount you owe
	Schedule D: Creditors Who Have Claims Secured 2a. Copy the total you listed in Column A, Amount	by Property (Official Form 106D) of claim, at the bottom of the last page of Part 1 of Schedule D	\$6,636.69
	Schedule E/F: Creditors Who Have Unsecured Cla 3a. Copy the total claims from Part 1 (priority unse	nims (Official Form 106E/F) secured claims) from line 6e of Schedule E/F	\$
	3b. Copy the total claims from Part 2 (nonpriority u	unsecured claims) from line 6j of Schedule E/F	\$99,476.00
		Your total liabilities	\$106,112.69
Part 3	3: Summarize Your Income and Expenses	ı	
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of	of Schedule I	\$
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Sche	edule J	\$ 2,675.27
Part 4	Answer These Questions for Administrative	ve and Statistical Records	
	Are you filing for bankruptcy under Chapters 7,  ☐ No. You have nothing to report on this part of	, 11, or 13? the form. Check this box and submit this form to the court with you	ır other schedules.
7.	■ Yes What kind of debt do you have?		
		Consumer debts are those "incurred by an individual primarily for a but lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal, family, or
	Your debts are not primarily consumer del the court with your other schedules.	bts. You have nothing to report on this part of the form. Check this	box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_859.97

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Debtor 1  Debtor 2 (Spouse, if filing)  United States Ban  Case number  Official For  Schedule In each category, se	m 106A/B	_	Last Name  Last Name  WASHINGTON		
Debtor 2 (Spouse, if filing) United States Ban Case number  Official For Schedule	First Name First Name kruptcy Court for the:	Middle Name	Last Name		
(Spouse, if filing) United States Ban Case number  Official For Schedule	kruptcy Court for the:				
United States Ban Case number  Official For Schedule In each category, se	kruptcy Court for the:				
Official For Schedule	m 106A/B	WESTERN DISTRICT OF	WASHINGTON		
Official For Schedule					
Schedule In each category, se					☐ Check if this is an
Schedule In each category, se					amended filing
Schedule In each category, se					
Schedule In each category, se					
In each category, se	. A/D. D				
					12/15
	as complete and accura space is needed, attach	ite as possible. If two married	people are filing together, both ar On the top of any additional page	e equally responsible for su	pplying correct
Part 1: Describe E	ach Residence, Building	g, Land, or Other Real Estate	You Own or Have an Interest In		
1. Do you own or ha	ive any legal or equitabl	e interest in any residence. b	uilding, land, or similar property?		
_	, , ,	,			
No. Go to Part 2	2.				
☐ Yes. Where is	the property?				
Part 2: Describe Y	our Vehicles				
□ No ■ Yes	cks, tractors, sport u	illity vehicles, motorcycle	•		
3.1 Make: <b>H</b>	YUNDAI	Who has an intere	st in the property? Check one	Do not deduct secured cl	
Model: E	LANTRA	Debtor 1 only		the amount of any secure Creditors Who Have Clair	
	014	☐ Debtor 2 only		Current value of the	Current value of the
Approximate		Debtor 1 and De	•	entire property?	portion you own?
Other informa	ation:	At least one of t	ne debtors and another		
		Check if this is (see instructions)	community property	\$5,000.00	\$5,000.00
Examples: Boats  No Yes  Add the dollar pages you have	value of the portion ve attached for Part 2.	onal watercraft, fishing vess you own for all of your en Write that number here	Il vehicles, other vehicles, and els, snowmobiles, motorcycle activities from Part 2, including any following items?	/ entries for	\$5,000.00  Current value of the cortion you own?  Do not deduct secured

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De	ebtor 1	Amanda E. Gilchrist	Case number (if known)	
6.	Example	old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware		
	□ No	Describe		
	<b>–</b> 165.	Describe		
		HOUSEHOLD GOODS		\$5,000.00
7.	_	ics es: Televisions and radios; audio, video, stereo, and digital equipmen including cell phones, cameras, media players, games	t; computers, printers, scanners; music c	ollections; electronic devices
	■ No □ Yes.	Describe		
В.		oles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pother collections, memorabilia, collectibles	oictures, or other art objects; stamp, coin	or baseball card collections;
		Describe		
9.	Example	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicyc musical instruments	les, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	□ No	Describe		
	■ Yes.	Describe		
		CAMERA		\$150.00
11.	■ No □ Yes.  Clothes Examp □ No	Describe  Solves: Pistols, rifles, shotguns, ammunition, and related equipment  Describe  Describe  Describe	essories	
		CLOTHES		\$2,800.00
12.	□ No ´	y  les: Everyday jewelry, costume jewelry, engagement rings, wedding  Describe	rings, heirloom jewelry, watches, gems, ç	gold, silver
		JEWELRY		\$3,000.00
	Examp  ■ No □ Yes.  Any oth ■ No	rm animals  bles: Dogs, cats, birds, horses  Describe  ner personal and household items you did not already list, included the specific information	ling any health aids you did not list	
15		he dollar value of all of your entries from Part 3, including any en	ntries for pages you have attached	\$10,950.00

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Best Case Bankruptcy

page 2

Debtor 1 Amanda E. Gilchrist		t	Case number (if known)			
Part	4: De	escribe Your Financ	ial Asset	ts		
Do	you o	wn or have any le	egal or e	quitable interest in any	р С	current value of the ortion you own? o not deduct secured laims or exemptions.
ı	■ No	,	·	our wallet, in your home,	in a safe deposit box, and on hand when you file your petition	
_	Exam				; certificates of deposit; shares in credit unions, brokerage houses the same institution, list each.	, and other similar
_	⊒ No ■ Yes.				Institution name:	
			17.1.	CHECKING #3889	BANK OF AMERICA	\$420.99
			17.2.	CHECKING #2165	RAVALLI CREDIT UNION	\$43.17
			17.3.	SAVINGS #2165	RAVALLI CREDIT UNION	\$0.00
	joint v	ublicly traded sto venture	ock and	interests in incorporate	ed and unincorporated businesses, including an interest in an	LLC, partnership, and
ı	joint v ■ No	venture			ed and unincorporated businesses, including an interest in an	LLC, partnership, and
_	<b>⊒</b> 1€5.	Give specific file		about them me of entity:	% of ownership:	
_	Negot	tiable instruments	include ¡	personal checks, cashiers	le and non-negotiable instruments s' checks, promissory notes, and money orders. r to someone by signing or delivering them.	
_	_	Give specific info		about them uer name:		
_		ment or pension ples: Interests in II			), thrift savings accounts, or other pension or profit-sharing plans	
		List each account		tely. of account:	Institution name:	
_	Yours		d deposi	ts you have made so that	you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies, or	others
					Institution name or individual:	
			UTIL	ITIES	TACOMA PUBLIC UTILITY	\$100.00
			REN'	т	LANDLORD	\$2.195.00

De	ebtor 1	Amanda E	E. Gilchrist			Case number (if know	n)
	Annuiti ■ No	ies (A contrac	ct for a periodic paymen	t of money to you, eithe	er for life or for a nur	mber of years)	
	☐ Yes		Issuer name and desc	ription.			
			ation IRA, in an accou 1), 529A(b), and 529(b)(		E program, or unde	r a qualified state tuition p	orogram.
	☐ Yes		Institution name and d	escription. Separately f	ile the records of an	y interests.11 U.S.C. § 521(	(c):
	Trusts, ■ No	, equitable or	r future interests in pro	pperty (other than any	thing listed in line	1), and rights or powers e	exercisable for your benefit
		Give specific	information about them				
			s, trademarks, trade se domain names, websites			reements	
		Give specific	information about them				
			es, and other general in permits, exclusive licens		iation holdings, liquo	or licenses, professional lice	nses
	☐ Yes.	Give specific	information about them				
Mo	oney or <sub>l</sub>	property owe	ed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
		unds owed t	o you				
	■ No □ Yes.	Give specific	information about them,	including whether you	already filed the ret	urns and the tax years	
		support oles: Past due	e or lump sum alimony, s	spousal support, child s	upport, maintenance	e, divorce settlement, prope	erty settlement
	☐ Yes.	Give specific	information				
		oles: Unpaid w	neone owes you wages, disability insurand unpaid loans you made		benefits, sick pay, v	vacation pay, workers' com	pensation, Social Security
	☐ Yes.	Give specific	information				
		i <b>ts in insuran</b> oles: Health, d		e; health savings accou	unt (HSA); credit, ho	omeowner's, or renter's insu	rance
	☐ Yes.	Name the ins	curance company of each Company nam			neficiary:	Surrender or refund value:
	If you a	terest in prop are the benefi one has died.	perty that is due you friciary of a living trust, ex	om someone who has pect proceeds from a li	s died fe insurance policy,	or are currently entitled to r	eceive property because
	■ No □ Yes.	Give specific	information				
33.			d parties, whether or n s, employment disputes			mand for payment	
	■ No	Doscribo con	ch claim				
	<b>-</b> 1€5.	Describe egg	on claiiii				

Deb	otor 1 Amanda E. Gilchrist			Case number (if known)	
34.	Other contingent and unliquidated clair	ns of every nature, includ	ding counterclaims of	of the debtor and rights to set of	ff claims
	No				
	Yes. Describe each claim				
35.	Any financial assets you did not alread	/ list			
	No				
	Yes. Give specific information				
36.	Add the dollar value of all of your entr				\$2,759.16
	for Part 4. Write that number here				Ψ2,733.10
Part	5: Describe Any Business-Related Property	/ You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. D	Oo you own or have any legal or equitable int	erest in any business-relate	d property?		
	No. Go to Part 6.				
	Yes. Go to line 38.				
Part	6: Describe Any Farm- and Commercial Fis If you own or have an interest in farmland,		Own or Have an Interes	st In.	
46. <b>I</b>	Do you own or have any legal or equital	ole interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.				
	☐ Yes. Go to line 47.				
Part	7: Describe All Property You Own or H	lave an Interest in That You	Did Not List Above		
	Do you have other property of any kind Examples: Season tickets, country club m				
	■ No	Citibolottip			
	Yes. Give specific information				
54.	Add the dollar value of all of your entr	ies from Part 7. Write tha	t number here		\$0.00
Part	8: List the Totals of Each Part of this Fo	orm			
	Part 1: Total real estate, line 2				\$0.00
	Part 2: Total vehicles, line 5	tomo lino 15	\$5,000.00		
57.	Part 4: Total financial accepta line 30	tems, line 15	\$10,950.00		
58. 50	Part 4: Total husiness related meneral	. line 45	\$2,759.16		
59.	Part 5: Total business-related property		\$0.00		
60. 61	Part 6: Total farm- and fishing-related Part 7: Total other property not listed,		\$0.00 \$0.00		
61.		-			
62.	Total personal property. Add lines 56 th	nrough 61	\$18,709.16	Copy personal property total	\$18,709.16
63.	Total of all property on Schedule A/B.	Add line 55 + line 62			\$18,709.16
					· ,

Fill in this infor	mation to identify your	case:		
Debtor 1	Amanda E. Gilchi	rist		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	WESTERN DISTRICT O	DF WASHINGTON	
Case number _				
(if known)				☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption				
		Copy the value from Schedule A/B						
	2014 HYUNDAI ELANTRA Line from Schedule A/B: 3.1	\$5,000.00		\$0.00	11 U.S.C. § 522(d)(5)			
	Zine nom oshodale 702. GT			100% of fair market value, up to any applicable statutory limit				
	HOUSEHOLD GOODS Line from Schedule A/B: 6.1	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)			
	Zino nom osnodalo 702. et 1			100% of fair market value, up to any applicable statutory limit				
	CAMERA Line from Schedule A/B: 9.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(5)			
	Line nom <i>Schedule A/D.</i> <b>9.1</b>			100% of fair market value, up to any applicable statutory limit				
	CLOTHES Line from Schedule A/B: 11.1	\$2,800.00		\$2,800.00	11 U.S.C. § 522(d)(3)			
	Line nom Schedule A/D. TTT			100% of fair market value, up to any applicable statutory limit				
	JEWELRY Line from Schedule A/B: 12.1	\$3,000.00		\$1,700.00	11 U.S.C. § 522(d)(4)			
	LINE HOLL SCHEUUIE PVD. 12.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

De	btor 1	Amanda E. Gilchrist			Case number (if known)		
		description of the property and line on dule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	-	CKING #3889: BANK OF RICA	\$420.99		\$420.99	11 U.S.C. § 522(d)(5)	
		from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	CHE	CKING #2165: RAVALLI CREDIT	\$43.17		\$43.17	11 U.S.C. § 522(d)(5)	
		from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
	SAV	INGS #2165: RAVALLI CREDIT	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)	
	_	from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit		
		ITIES: TACOMA PUBLIC UTILITY	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)	
	LINE	Tom Schedule A.D. 22.1			100% of fair market value, up to any applicable statutory limit		
		T: LANDLORD	\$2,195.00		\$2,195.00	11 U.S.C. § 522(d)(5)	
	Line from Scriedule AVB. 22.2				100% of fair market value, up to any applicable statutory limit		
<ul> <li>3. Are you claiming a homestead exemption of more than \$170,350?         (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)         No     </li> </ul>							
		Yes. Did you acquire the property covere  ☐ No	a by the exemption w	iuliii T	,215 days before you filed this case:	r	
		□ Yes					

	n to identify you				
	manda E. Gilc st Name			_	
Debtor 2	st Name	Middle Name Last Name			
	st Name	Middle Name Last Name		-	
United States Bankrup	tcy Court for the	WESTERN DISTRICT OF WASHINGTON		_	
Case number					
(if known)				_	if this is an
				ameno	led filing
Official Form 10	06D				
Schedule D:	Creditors	Who Have Claims Secured	d by Propert	:y	12/15
		If two married people are filing together, both are equout, number the entries, and attach it to this form. Or			
. Do any creditors have	claims secured by	y your property?			
☐ No. Check this	box and submit t	his form to the court with your other schedules. Yo	ou have nothing else	to report on this form.	
Yes. Fill in all of			· ·	•	
Part 1: List All Sec	ured Claims				
2. List all secured claim	s. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
		s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Wells Fargo		Describe the property that secures the claim:	\$6,636.69	\$5,000.00	\$1,636.69
Creditor's Name		2014 HYUNDAI ELANTRA			
DO Poy 51102		As of the date you file, the claim is: Check all that			
PO Box 51193 Los Angeles,		apply.			
Number, Street, City, S		☐ Contingent ☐ Unliquidated			
, , , , , , , , , , , , , , , , , , , ,	,	☐ Disputed			
	N	Nature of lien. Check all that apply.			
Who owes the debt?	neck one.				
Who owes the debt? C	леск опе.	■ An agreement you made (such as mortgage or sec	ured		
_	леск опе.	An agreement you made (such as mortgage or sec car loan)	eured		
Debtor 1 only		0 , ( 00	ured		
■ Debtor 1 only □ Debtor 2 only	? only	car loan)	ured		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2	e only otors and another	car loan)  Statutory lien (such as tax lien, mechanic's lien)	ured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 ☐ At least one of the det ☐ Check if this claim re	e only otors and another	car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit	ured		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 □ At least one of the det □ Check if this claim recommunity debt	e only otors and another	car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	ured		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 □ At least one of the det □ Check if this claim recommunity debt  Date debt was incurred  Add the dollar value o	conly otors and another elates to a	car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number		36.69	
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 □ At least one of the det □ Check if this claim recommunity debt  Date debt was incurred  Add the dollar value o	e only stors and another elates to a  f your entries in C of your form, add	car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)  Last 4 digits of account number	\$6,6	36.69 36.69	

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in thi	s information to identify your c	ase:				
Debtor 1	Amanda E. Gilchri					
Dobtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, fi	lling) First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the:	WESTERN DISTRICT OF V	VASHINGTON			
Case nun	nhar					
(if known)						Check if this is an
						amended filing
Official	Form 106E/E					
	Form 106E/F	a Haya Haaaayya	d Claima			12/15
	ule E/F: Creditors Wi			and a Community of the National	DIODITY	
left. Attach	<ul> <li>Creditors Who Have Claims Secu the Continuation Page to this page case number (if known).</li> <li>List All of Your PRIORITY Uns</li> </ul>	. If you have no information to				
1. Do an	y creditors have priority unsecured	claims against you?				
■ No	. Go to Part 2.					
☐ Ye	s.					
Part 2:	List All of Your NONPRIORITY	Uneacured Claims				
	y creditors have nonpriority unsecu					
□ No	. You have nothing to report in this pa	rt. Submit this form to the court w	rith your other sch	edules.		
■ Ye	s.		•			
unsec	Il of your nonpriority unsecured cla ured claim, list the creditor separately ne creditor holds a particular claim, lis	for each claim. For each claim lis	ted, identify what	ype of claim it is. Do not list clai	ms already	included in Part 1. If more
Fait 2						Total claim
	mericollect	Last 4 digits of a	account number	Misc		\$4,500.00
	onpriority Creditor's Name O Box 1505	When was the de	ebt incurred?	2019		
	Manitowoc, WI 54221					
	umber Street City State Zip Code	As of the date yo	ou file, the claim	s: Check all that apply		
_	/ho incurred the debt? Check one.	-				
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRI	ORITY unsecure	ł claim:		
	At least one of the debtors and anot					
	I Check if this claim is for a comm ebt	unity		ration agreement or divorce tha	t vou did na	ot
ls	the claim subject to offset?	report as priority		agroomont or alvoroe the	. you did lit	••
•	No	☐ Debts to pens	ion or profit-sharir	g plans, and other similar debts		
Г	7 Ves	Other Specific	Assigned			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

Debto	Amanda E. Gilchrist		Case number (if known)	
4.2	CB1 Inc.	Last 4 digits of account number	3379	\$11,161.00
	Nonpriority Creditor's Name 1715 S. Reserve #C Missoula, MT 59801	When was the debt incurred?	2018	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Assigned		
4.3	CBS	Last 4 digits of account number	9167	\$29.00
	Nonpriority Creditor's Name PO Box 7339 Missoula, MT 59807	When was the debt incurred?	2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	<u> </u>	·		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans	- O.G	
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Assigned		
4.4	Collection Professionals	Last 4 digits of account number	3163	\$225.00
	Nonpriority Creditor's Name 3104 @. Broadway	When was the debt incurred?	2019	
	Missoula, MT 59808  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	Continuent		
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Assigned		
	_ 100	- Other. Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 11

Debto	Amanda E. Gilchrist		Case number (if known)	
4.5	Convergent	Last 4 digits of account number	4994	\$148.00
	Nonpriority Creditor's Name PO Box 9004 Renton, WA 98057	When was the debt incurred?	2018	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Assigned		
4.6	CRM	Last 4 digits of account number	9196	\$2,641.00
	Nonpriority Creditor's Name PO Box 2420 Southwarts MI 48105	When was the debt incurred?	2019	
	Southgate, MI 48195  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Assigned		
4.7	Diversified Consultants	Last 4 digits of account number	7287	\$148.00
	Nonpriority Creditor's Name PO Box 551268	When was the debt incurred?	2018	
	Jacksonville, FL 32255  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	O continuent		
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	<del></del>	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Assigned		
	<b>—</b> 103	Other. Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 11

Debtor	1 Amanda E. Gilchrist	Case number (if known)				
4.8	Employment Security Nonpriority Creditor's Name PO Box 9046 Olympia, WA 98507	Last 4 digits of account number  When was the debt incurred?	2015	\$580.00		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed  Type of NONPRIORITY unsecure  ☐ Student loans  ☐ Obligations arising out of a separations.				
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharir	•			
	Yes	Other. Specify Overpayme		\$580.00 Unknown		
4.9	Employment Security Nonpriority Creditor's Name	Last 4 digits of account number		Unknown		
	PO Box 9046 Olympia, WA 98507	When was the debt incurred?	2017			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify overpayme	ent			
4.1	Family Heritage	Last 4 digits of account number	1440;1467;1 549	\$1,000.00		
	Nonpriority Creditor's Name PO Box 470608	When was the debt incurred?	2018			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separate as priority decimal.				
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	ng plans, and other similar debts			
	☐ Yes	Other. Specify Medical				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 11

Financial Assistance	Last 4 digits of account number	Misc	Unknow
Nonpriority Creditor's Name PO Box 7148 Bellevue, WA 98008	When was the debt incurred?	2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card		
FMS	Last 4 digits of account number	7782	\$63.5
Nonpriority Creditor's Name PO Box 707600	When was the debt incurred?	2019	
Tulsa, OK 74170  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,,,,,,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	n plans, and other similar debts	
■ No  Yes	Other. Specify Assigned	g plans, and other similar debts	
GCS	Last 4 digits of account number	<u>1636</u>	\$1,324.0
Nonpriority Creditor's Name PO Box 1330 Missoula, MT 59806	When was the debt incurred?	2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other. Specify Assigned	<b>.</b>	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 11

Amanda E. Gilchrist			
Inland Imaging	Last 4 digits of account number	0261	\$212.00
Nonpriority Creditor's Name PO Box 84328 Seattle, WA 98124	When was the debt incurred?	2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		
Marcus Daly Hospital	Last 4 digits of account number	Misc.	\$25,000.00
Nonpriority Creditor's Name 1200 Westwood Dr. Hamilton, MT 59840	When was the debt incurred?	2018	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Medical		
Missoula Emergency	Last 4 digits of account number	2370	\$1,324.00
Nonpriority Creditor's Name PO Box 1359 Missoula, MT 59806	When was the debt incurred?	2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	■ Other Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 11

Last 4 digits of account number Misc.	\$25,000.0
When was the debt incurred? 2019	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
<u></u>	
Obligations arising out of a separation agreement or divorce that you di report as priority claims	d not
☐ Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Medical	
Last 4 digits of account number 2637	\$100.0
When was the debt incurred? 2019	
As of the date you file, the claim is: Check all that apply	
, , , , , , , , , , , , , , , , , , , ,	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
<u> </u>	
☐ Obligations arising out of a separation agreement or divorce that you di	d not
<u></u>	
Other. Specify Furniture Lease	
Last 4 digits of account number 6169	\$493.0
When was the debt incurred? 2019	
As of the date you file, the claim is: Check all that apply	
·	
•	
Student loans	
	d not
report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
	When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Cother. Specify Medical  Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts  Furniture Lease  Last 4 digits of account number Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts  Furniture Lease  Last 4 digits of account number Cother. Specify Uniquidated Unliquidated Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you direport as priority claims

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 11

Debte	or 1 Amanda E. Gilchrist	Case number (if known)					
4.2 0	Providence	Last 4 digits of account number	0569	\$945.00			
	Nonpriority Creditor's Name PO Box 3177 Portland, OR 97208	When was the debt incurred?	2019				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Medical					
4.2	Puget Sound Collections  Nonpriority Creditor's Name	Last 4 digits of account number	Misc.	\$4,000.00			
	PO Box 66995 Tacoma, WA 98464	When was the debt incurred?	2019				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other. Specify Assigned					
4.2	Ravalli Family Medicine	Last 4 digits of account number	0884	\$425.00			
	Nonpriority Creditor's Name 411 W. Main St. Hamilton, MT 59840	When was the debt incurred?	2018				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	•	ype of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other Specify Medical					
	30	- Other. Specify					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 11

Riverside Radiology	Last 4 digits of account number	5400	\$28.00
Nonpriority Creditor's Name PO Box 3138 Missoula, MT 59806	When was the debt incurred?	2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	<ul> <li>Obligations arising out of a sepa report as priority claims</li> </ul>	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical		
Rodenburg Law Firm	Last 4 digits of account number	2554	\$5,936.00
Nonpriority Creditor's Name 300 NP Ave N #105 Fargo, ND 58108	When was the debt incurred?	2019	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	a diami.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other Specify Assigned		
Rural Metro	Last 4 digits of account number	3000	\$2,641.00
Nonpriority Creditor's Name PO Box 749667	When was the debt incurred?	2019	<u>-</u>
Los Angeles, CA 90074	when was the debt incurred?	2019	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d eleies	
At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:	
☐ Check if this claim is for a community		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	a plane, and other similar delete	
No	Debts to pension or profit-sharin	y pians, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 11

ole Stone	Lord A. P. Ward Control of Control	œ.
npriority Creditor's Name	Last 4 digits of account number	\$1
D Box 1359	When was the debt incurred? 2019	
ssoula, MT 59806 mber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
no incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
bt the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
coma Emergency	Last 4 digits of account number Misc.	\$10
npriority Creditor's Name	Last 4 digits of account number	Ψ.0
D Box 661448	When was the debt incurred? 2019	
rcadia, CA 91066 mber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
no incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
bt the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
RA-MINW PS	Last 4 digits of account number	•
npriority Creditor's Name		
D Box 2429	When was the debt incurred? 2019	
dianapolis, IN 46206 mber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
no incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
bt the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 11

Official Form 106 E/F

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim 0.00
Total claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ \$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	99,476.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	99,476.00

Fill in this infor	mation to identify your			
Debtor 1	Amanda E. Gilch	rist		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (	OF WASHINGTON	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<del>-</del>
	City		State	ZIP Code	<del></del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
	•				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	s information to identify your	case:			
Debtor 1	Amanda E. Gilch	rist			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT	OF WASHINGTON		
Case num (if known)	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	<u>ahtare</u>			12/15
JCHE	dule II. Ioui cou	CDIOIS			12/13
fill it out, a	e filing together, both are equand number the entries in the eand case number (if known) you have any codebtors? (If	boxes on the left. Attac . Answer every question	h the Additional Page to n.	o this page. On the top of an	
_		,	•		
■ No □ Ye					
	thin the last 8 years, have you na, California, Idaho, Louisiana				s and territories include
`	o. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in lin Form	olumn 1, list all of your codebt e 2 again as a codebtor only i n 106D), Schedule E/F (Officia column 2.	f that person is a guarar	ntor or cosigner. Make s	sure you have listed the cred	itor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to Check all schedules that	o whom you owe the debt apply:
3.1				☐ Schedule D, line	
3.1	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street	Otata	710.0	_	
	City	State	ZIP Code		

						•			
	in this information to identify your countries to a Manda E. (								
	btor 2 buse, if filing)								
Uni	ited States Bankruptcy Court for the	: WESTERN DISTRICT	OF WASHINGTON						
	se number nown)						ded filing ment showir	ng postpetition	
<u>O</u>	fficial Form 106I					MM / DD	/ YYYY		
S	chedule I: Your Inc	ome							12/15
spo atta Pa	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment	ır spouse is not filing wi	th you, do not inclu	de inforr	nati	on about your	pouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1			Debto	r 2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed				ployed employed		
	employers.  Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed the	nere?						
Pa	rt 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to r	eport for	any	line, write \$0 in t	ne space. In	clude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	mple	oyers for that pe	son on the I	ines below. If	you need
						For Debtor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.0	<b>D</b> \$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.0		N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

				For	Debtor 1		Debtor 2 or -filing spouse	e
	Сору	y line 4 here	4.	\$	0.00	\$	N/	
5.	List a	all payroll deductions:		_		<u> </u>		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/	/Δ
	5b.	Mandatory contributions for retirement plans	5b.		0.00	\$		A A
	5c.	Voluntary contributions for retirement plans	5c.		0.00	·	N/	<del></del>
	5d.	Required repayments of retirement fund loans	5d.		0.00	· · —	N/	
	5e.	Insurance	5e.		0.00	\$	N/	
	5f.	Domestic support obligations	5f.	\$-	0.00	· · —	N/	
	5g.	Union dues	5g.	· · —	0.00	- <b>\$</b> —	N/	
	5h.	Other deductions. Specify:	5h.	· · —	0.00	- ! —	N/	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	0.00	\$	N/	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/	/Δ
			٠.	Ψ_	0.00	- Ψ		_
8.	8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income.	90	¢	0.00	¢	N	<b>7</b> A
	8b.	monthly net income.  Interest and dividends	8a. 8b.		0.00	- \$ <u> </u>	N/ N/	
	8c.	Family support payments that you, a non-filing spouse, or a dependent	ou.	Φ_	0.00	- Φ_	N/	A
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	· · —	0.00	\$	N/	
	8d.	Unemployment compensation	8d.		0.00		N/	
	8e.	Social Security	8e.	\$_	0.00	\$	N/	<u>'A</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N	<b>′</b> A
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/	<b>Ά</b>
	8h.	Other monthly income. Specify:	8h.	+ \$ _	0.00	+ \$	N/	<b>'</b> A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N	V/A
						1		
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.   \$	<u> </u>	0.00 + \$		<b>N/A</b> = \$	0.00
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.						0.00	
12.	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies						12. \$	0.00
13.	Do ye	ou expect an increase or decrease within the year after you file this form	?					bined thly income
		Yes Explain:						

Official Form 106l Schedule I: Your Income page 2

Fill	in this informat	tion to identify yo	our case:					
Deb	tor 1	Amanda E. C	Silchrist			Che	eck if this is:	
Deb	tor 2						An amended filing	wing postpetition chapter
	ouse, if filing)							the following date:
United States Bankruptcy Court for the: WESTERN DISTRICT OF WASHINGTON							MM / DD / YYYY	
Case	e number							
(If kr	nown)							
Of	ficial Fo	rm 106J						
		J: Your	Exper	nses				12/15
Be a	as complete a	and accurate as	possible eded, atta	. If two married people ar				
Part	t 1: Descr	ibe Your House	hold					
	■ No. Go to							
			in a separ	ate household?				
	□ No		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents i	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No
3.	Do vour exp	enses include	_	NI-			<u> </u>	☐ Yes
	expenses of	f people other to d your depende	han $_{m  au}$	No Yes				
Part		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance is cluded it on Schedule I: Y				
(Off	icial Form 10	6I.)					Your exp	enses
4.		r home owners		ses for your residence. In	nclude first mortgage	e 4.	\$	1,575.00
	If not includ	ed in line 4:						
		state taxes				4a.	·	0.00
		rty, homeowner's				4b.	·	0.00
		maintenance, re owner's associat	•	upkeep expenses		4c. 4d.		0.00 0.00
5.				our residence, such as ho	me equity loans	5.		0.00

Official Form 106J Schedule J: Your Expenses page 2

Salatan A				
Debtor 1	Amanda E. Gilcl	Nrist Middle Name	Last Name	
ebtor 2	. not realite	made Hame	Zuot Maine	
Spouse if, filing)	First Name	Middle Name	Last Name	
Inited States B	Sankruptcy Court for the:	WESTERN DISTR	RICT OF WASHINGTON	
Case number f known)				☐ Check if this is an amended filing
	m 106Dec	an Individı	ual Debtor's Sche	dules 1
wo married p	people are filing togeth	er, both are equally r	responsible for supplying correct ir	nformation.
		Cla bankana (a ba	dadaa aa aa aa dadaa Male	(-11-1
				ng a false statement, concealing property, o
btaining mone	ey or property by fraud	in connection with a		ing a false statement, concealing property, os up to \$250,000, or imprisonment for up to
btaining mone		in connection with a		
btaining mone	ey or property by fraud	in connection with a		
otaining mone	ey or property by fraud	in connection with a		
otaining mone ears, or both.	ey or property by fraud 18 U.S.C. §§ 152, 1341,	in connection with a		
otaining mone ears, or both.	ey or property by fraud	in connection with a		
otaining mone ears, or both.	ey or property by fraud 18 U.S.C. §§ 152, 1341, gn Below	in connection with a 1519, and 3571.		s up to \$250,000, or imprisonment for up to
btaining mone ears, or both. Sig	ey or property by fraud 18 U.S.C. §§ 152, 1341, gn Below	in connection with a 1519, and 3571.	a bankruptcy case can result in fine	s up to \$250,000, or imprisonment for up to
Signal Money Principle Control of the Control of th	ey or property by fraud 18 U.S.C. §§ 152, 1341, gn Below ay or agree to pay som	in connection with a 1519, and 3571.	a bankruptcy case can result in fine	s up to \$250,000, or imprisonment for up to
Signal Did you page	ey or property by fraud 18 U.S.C. §§ 152, 1341, gn Below	in connection with a 1519, and 3571.	a bankruptcy case can result in fine	up to \$250,000, or imprisonment for up to
btaining mone ears, or both.  Sig  Did you pa	ey or property by fraud 18 U.S.C. §§ 152, 1341, gn Below ay or agree to pay som	in connection with a 1519, and 3571.	a bankruptcy case can result in fine	s up to \$250,000, or imprisonment for up to
Did you page No	gn Below  Name of person	in connection with a 1519, and 3571. eone who is NOT an	a bankruptcy case can result in fine	uptcy forms?  Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1)
Did you pool Yes.  Under penthat they a	gn Below  Name of person  alty of perjury, I declare	in connection with a 1519, and 3571. eone who is NOT an	a bankruptcy case can result in fine  a attorney to help you fill out bankru  e summary and schedules filed with	aptcy forms?  Attach Bankruptcy Petition Preparer's Notion Declaration, and Signature (Official Form 1) on this declaration and
Did you part of the they a X /s/ Am Aman	ey or property by fraud 18 U.S.C. §§ 152, 1341, gn Below hay or agree to pay som  Name of person  halty of perjury, I declarate true and correct.	in connection with a 1519, and 3571. eone who is NOT an	a bankruptcy case can result in fine  attorney to help you fill out bankru  e summary and schedules filed with	aptcy forms?  Attach Bankruptcy Petition Preparer's Notion Declaration, and Signature (Official Form 1) on this declaration and
Did you particular that they a  X /s/ Am Aman Signatu	ey or property by fraud 18 U.S.C. §§ 152, 1341, gn Below  ay or agree to pay som  Name of person  alty of perjury, I declarate true and correct.  nanda E. Gilchrist nda E. Gilchrist	in connection with a 1519, and 3571. eone who is NOT an	a bankruptcy case can result in fine  a attorney to help you fill out bankru  e summary and schedules filed with	aptcy forms?  Attach Bankruptcy Petition Preparer's Notion Declaration, and Signature (Official Form 1) on this declaration and

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Fil	I in this inform	nation to identify yo	ur case:								
De	ebtor 1	Amanda E. Gild	christ								
		First Name	Middle Name	Last Name							
1	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name							
Ur	nited States Bar	nkruptcy Court for the	: WESTERN DISTRICT (	OF WASHINGTON							
		mapley countries and									
Case number(if known)						Check if this is an amended filing					
	fficial Fo										
Ве	as complete a	nd accurate as pos	sible. If two married people		e equally responsible for su						
		ore space is needed a). Answer every qu		o this form. On the top of a	ny additional pages, write yo	our name and case					
Pa	rt 1: Give D	etails About Your N	larital Status and Where Yo	ou Lived Before							
1.	What is your	current marital sta	tus?								
	Married										
	□ Not mar	ried									
2.	During the last 3 years, have you lived anywhere other than where you live now?										
	□ No										
	Yes. Lis	t all of the places you	lived in the last 3 years. Do	not include where you live no	W.						
	Debtor 1 Pri	ior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there					
	112 Aspen Hamilton,		From-To: <b>6/18 to 2/19</b>	☐ Same as Debtor	r 1	☐ Same as Debtor 1 From-To:					
	6117 N 16t Tacoma, V	th St #L105 VA 98406	From-To: <b>2014-2018</b>	☐ Same as Debtor	r1	☐ Same as Debtor 1 From-To:					
<b>3.</b> sta					nity property state or territor Rico, Texas, Washington and \						
	■ No										
		ike sure you fill out S	chedule H: Your Codebtors (	Official Form 106H).							
Do	rt 2 Explai	n the Sources of Yo	ur Incomo								
Г	Ехріаі	in the Sources of To	ui income								
4.	Fill in the tota	I amount of income y	ou received from all jobs and	ing a business during this y d all businesses, including par ive together, list it only once u		endar years?					
	□ No										
	Yes. Fill	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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					Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
				ent year until ankruptcy:	■ Wages, commissions, bonuses, tips	\$9,048.30	☐ Wages, commissions, bonuses, tips			
					☐ Operating a business		☐ Operating a business			
Fo (Ja	r last anuar	calen y 1 to	dar year: Decembe	r 31, 2018 )	■ Wages, commissions, bonuses, tips	\$18,244.63	☐ Wages, commissions, bonuses, tips			
					☐ Operating a business		☐ Operating a business			
				efore that: r 31, 2017 )	■ Wages, commissions, bonuses, tips	\$61,937.00	☐ Wages, commissions, bonuses, tips			
					☐ Operating a business		☐ Operating a business			
and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royal winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No  Yes. Fill in the details.				nly once under Debtor 1.	u gambiing and lottery					
					Debtor 1		Debtor 2			
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
Pa	rt 3:	List	Certain P	ayments You	Made Before You Filed for I	Bankruptcy				
6.					's debts primarily consumer					
٥.		No.	Neither [	Debtor 1 nor D	•	imer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an		
				e 90 days befo Go to line 7	re you filed for bankruptcy, did	d you pay any creditor a total	of \$6,825* or more?			
			□ Yes	List below e	each creditor to whom you paid		n one or more payments and the ations, such as child support a			
			* Subjec		payments to an attorney for the ton 4/01/22 and every 3 years					
		Yes.			r both have primarily consure you filed for bankruptcy, did		of \$600 or more?			
			■ No.	Go to line 7						
			□ Yes	include pay			the total amount you paid tha port and alimony. Also, do not i			

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1	Amanda E. Gilchrist			Ca	se number (if	known)		
7.	Inside of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relative control, or owr	s of any ger ner of 20% o	eral partners; partn or more of their votin	erships of whing securities;	nich you are a and any man	a genera aging a	I partner; corporations gent, including one for
	_	No Yes. List all payments to an insider.							
	Insid	ler's Name and Address	Dates of pa	yment	Total amount paid	Amount still	•	son for	this payment
8.	inside Includ	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	_	No Yes. List all payments to an insider							
		ler's Name and Address	Dates of pa	yment	Total amount paid	Amount still			this payment itor's name
	t 4:	Identify Legal Actions, Repossession			para	Othi.	111010	140 0104	noi o namo
	<b>I</b> N	ications, and contract disputes.  No Yes. Fill in the details.	Nature of th	no caso	Court or agency	,	State	us of the	0.0350
		e title e number	nature of th	le case	Court or agency	/	Stati	us or th	e case
10.	Check ■ N □ Y	n 1 year before you filed for bankrupto c all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	Describe th	e Property		foreclosed,	garnished, a	ttached	l, seized, or levied?  Value of the property
			Explain wha	at nappene	1				
11.	accou	n 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details. litor Name and Address	ause you owe	ed a debt?	luding a bank or fi	inancial inst	itution, set o		mounts from your  Amount
							taken		
12.		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a			erty in the possess	sion of an as	signee for th	ne bene	fit of creditors, a
		No Yes							
Par	t 5:	List Certain Gifts and Contributions							
13.	<b>=</b> N	n 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	tcy, did you g	ive any gift	s with a total value	e of more tha	an \$600 per p	person?	•
	Gifts	with a total value of more than \$600 person	Descri	be the gifts			Dates you g the gifts	jave	Value
	Perse Addr	on to Whom You Gave the Gift and ress:							

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debto	or 1 Amanda E. Gilchrist		Ca	ase number (	if known)			
_	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? □ No							
	Yes. Fill in the details for each gift or c	contribut	ion.					
r	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed		Dates you contributed	Value		
	Goodwill		Furniture		2018	\$1,000.00		
Part 6	6: List Certain Losses							
	Vithin 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did yo	ou lose anyt	hing because of the	t, fire, other disaster		
•	■ No □ Yes. Fill in the details.							
[	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the lose the amount that insurance has paid. Li	st pending	Date of your loss	Value of property lost		
Part 7	7: List Certain Payments or Transfers		nce claims on line 33 of Schedule A/B: F	горепу.				
	<u> </u>							
C	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>							
Æ	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	<b>í</b> ou	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment		
1	Law Offices of Tom S. Hyde 1119 Pacific Avenue Suite 1204 Tacoma, WA 98402				2019	\$1,275.00		
р	Vithin 1 year before you filed for bankru promised to help you deal with your cree to not include any payment or transfer that	ditors o	r to make payments to your creditors		r transfer any prope	rty to anyone who		
	No Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment		
tr In in	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No							
	Yes. Fill in the details.  Person Who Received Transfer		Description and value of	Describe	any property or	Date transfer was		
	Address		property transferred		received or debts	made		
F	Person's relationship to you			,	J			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

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Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5

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Best Case Bankruptcy

	for	r someone.							
		No							
	_								
	_	wner's Name ddress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value			
Par	t 10	0: Give Details About Environmental Informa	,						
For	the	purpose of Part 10, the following definitions a	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
		te means any location, facility, or property as o own, operate, or utilize it, including disposal s		law,	whether you now own, operate,	or utilize it or used			
		azardous material means anything an environn Izardous material, pollutant, contaminant, or s		wa	ste, hazardous substance, toxic	substance,			
Rep	ort	all notices, releases, and proceedings that yo	u know about, regardless of wher	the	ey occurred.				
24.	На	as any governmental unit notified you that you	may be liable or potentially liable	und	der or in violation of an environm	ental law?			
		No							
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Ha	ave you notified any governmental unit of any	release of hazardous material?						
		No							
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Ha	ave you been a party in any judicial or adminis	trative proceeding under any envi	ron	mental law? Include settlements	and orders.			
		_							
	_	No Yes. Fill in the details.							
		ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11	1: Give Details About Your Business or Conr	·						
27.	Wi	ithin 4 years before you filed for bankruptcy, d	lid you own a business or have an	v of	f the following connections to an	/ business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
		☐ A partner in a partnership	,	. `	,				
			ive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation								

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Amanda E. Gilchrist	Case number (if known)		
■ No. None of the above applies. Go to	Part 12.		
Yes. Check all that apply above and t	fill in the details below for each business.		
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed	
28. Within 2 years before you filed for bankru institutions, creditors, or other parties.	ptcy, did you give a financial statement to a	anyone about your business? Include all financial	
Yes. Fill in the details below.			
Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Part 12: Sign Below			
	a false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.	
/s/ Amanda E. Gilchrist			
Amanda E. Gilchrist Signature of Debtor 1	Signature of Debtor 2		
Date November 19, 2019	Date		
Did you attach additional pages to Your States  ■ No □ Yes	ment of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?	
Did you pay or agree to pay someone who is n ■ No	ot an attorney to help you fill out bankrupte	cy forms?	
☐ Yes. Name of Person Attach the Bank	ruptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				_
Fill in this inform	nation to identify your	case:		
Debtor 1	Amanda E. Gilchi			]
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	kruptcy Court for the:	WESTERN DIST	RICT OF WASHINGTON	
Case number				
(if known)				☐ Check if this is an amended filing
				_ amended liling
Official For	100			
Official For		n for India	viduale Filing Under Chent	10 K 7
Statemen	t of intentio	n for mary	viduals Filing Under Chapt	<b>:er /</b> 12/15
If you are an indiv	vidual filing under cha	pter 7, you must fi	Il out this form if:	
creditors have	claims secured by yo	ur property, or		
	ed personal property a			
	er is earlier, unless th		you file your bankruptcy petition or by the date some time for cause. You must also send copies to t	
	ople are filing togethe	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
	nd accurate as possib our name and case nur		s needed, attach a separate sheet to this form. Or	n the top of any additional pages,
		,		
	ur Creditors Who Have			
<ol> <li>For any credito information bel</li> </ol>		art 1 of Schedule D	D: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
Identify the cre	ditor and the property t	hat is collateral	What do you intend to do with the property the secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's W	ells Fargo		☐ Surrender the property.	□ No
name:	one i ai ge		Retain the property and redeem it.	— ···•
Description of	2014 HYUNDAI EL	ANTRA	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	2011111011271122	,	Retain the property and [explain]:	
securing debt:			RETAIN AND PAY	<u> </u>
Part 2: List Yo	ur Unexpired Persona	I Property Leases		
For any unexpired			I in Schedule G: Executory Contracts and Unexpinexpired leases are leases that are still in effect; t	
			the trustee does not assume it. 11 U.S.C. § 365(p	
Describe your ur	nexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of leas	sed			
Property:				☐ Yes
Lessor's name:				□ No
Description of lease Property:	sed			☐ Yes
				<b>—</b> 103
Lessor's name:				□ No
Official Form 108		Statement of I	ntention for Individuals Filing Under Chapter 7	page 1

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Best Case Bankruptcy

Deb	tor 1	Amanda E. Gilchrist	Case number (if known)
	criptio	n of leased	☐ Yes
Des	sor's na cription perty:	ame: n of leased	□ No
Des	sor's na cription perty:	ame: n of leased	□ No
Des	sor's na cription perty:	ame: n of leased	□ No
Des	sor's na cription perty:	ame: n of leased	□ No
Part		Sign Below	
		alty of perjury, I declare that I have indicated my intention abou hat is subject to an unexpired lease.	any property of my estate that secures a debt and any personal
X	Ama	Amanda E. Gilchrist Anda E. Gilchrist ature of Debtor 1	Signature of Debtor 2
	Date	<b>November 19, 2019</b> Da	e

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Best Case Bankruptcy

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# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### **United States Bankruptcy Court** Western District of Washington

In re	Amanda E. Gilchrist		Case No.					
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPENSATI	ON OF ATTORNE	EY FOR DI	EBTOR(S)				
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert ompensation paid to me within one year before the filing of the perendered on behalf of the debtor(s) in contemplation of or in contemplation.	etition in bankruptcy, or ag	greed to be paid	to me, for services rendered or to				
	For legal services, I have agreed to accept		\$	1,275.00				
	Prior to the filing of this statement I have received		\$	1,275.00				
	Balance Due		\$	0.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	I have not agreed to share the above-disclosed compensation	with any other person unles	s they are mem	abers and associates of my law firm.				
	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the	people sharing in the com	pensation is atta	ached.				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
t c	<ul> <li>Analysis of the debtor's financial situation, and rendering advi</li> <li>Preparation and filing of any petition, schedules, statement of</li> <li>Representation of the debtor at the meeting of creditors and co</li> <li>[Other provisions as needed]</li> <li>d. Providing a complete copy of the petition, sci</li> <li>e. Advising the debtor regarding actions and th</li> <li>f. Advising the debtor regarding the effects or r</li> <li>g. Advising and reminding the debtor regarding completion of debt counseling;</li> <li>h. Providing required post petition financial state</li> </ul>	affairs and plan which may nfirmation hearing, and any needules, statement of a reatened actions by cre eaffirming debts; required post petition	be required; y adjourned hea ffairs, and ar editors; financial stat	arings thereof; ny plan; ements and certification of				
6. I	By agreement with the debtor(s), the above-disclosed fee does not Representation of the debtors in any discharged post filing amendments, relief from stay actions 341 meetings of creditors debtor misses.	ibility actions, judicial l	lien avoidand					
	CERT	IFICATION						
	certify that the foregoing is a complete statement of any agreement ankruptcy proceeding.	ent or arrangement for payr	ment to me for i	representation of the debtor(s) in				
N	ovember 19, 2019	/s/ Tom S. Hyde						
D	nte	Tom S. Hyde 20509 Signature of Attorney						
		LAW OFFICES OF TO						
		1119 PACIFIC AVENU	E					
		SUITE 1204 TACOMA, WA 98402						
		(253) 472-4448; (425)						
		Wiceverett@comcast.  Name of law firm	net					

### **United States Bankruptcy Court** Western District of Washington

In re	Amanda E. Gilchrist		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR N	MATRIX	
The ab	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	November 19, 2019	/s/ Amanda E. Gilchrist		
		Amanda E. Gilchrist		
		Signature of Debtor		

AMERICOLLECT PO BOX 1505 MANITOWOC, WI 54221

CB1 INC. 1715 S. RESERVE #C MISSOULA, MT 59801

CBS PO BOX 7339 MISSOULA, MT 59807

COLLECTION PROFESSIONALS 3104 @. BROADWAY MISSOULA, MT 59808

CONVERGENT PO BOX 9004 RENTON, WA 98057

CRM
PO BOX 2420
SOUTHGATE, MI 48195

DIVERSIFIED CONSULTANTS PO BOX 551268 JACKSONVILLE, FL 32255

EMPLOYMENT SECURITY PO BOX 9046 OLYMPIA, WA 98507

EMPLOYMENT SECURITY PO BOX 9046 OLYMPIA, WA 98507

FAMILY HERITAGE PO BOX 470608 BROADVIEW HEIGHTS, OH 44147

FINANCIAL ASSISTANCE PO BOX 7148 BELLEVUE, WA 98008 FMS PO BOX 707600 TULSA, OK 74170

GCS PO BOX 1330 MISSOULA, MT 59806

INLAND IMAGING PO BOX 84328 SEATTLE, WA 98124

MARCUS DALY HOSPITAL 1200 WESTWOOD DR. HAMILTON, MT 59840

MISSOULA EMERGENCY PO BOX 1359 MISSOULA, MT 59806

MULTICARE PO BOX 34883 SEATTLE, WA 98124

PROGRESSIVE LEASING 5659 W. TALAVI BLVD GLENDALE, AZ 85306

PROLIANCE
7308 BRIDGEPORT WAY W. #201
LAKEWOOD, WA 98499

PROVIDENCE
PO BOX 3177
PORTLAND, OR 97208

PUGET SOUND COLLECTIONS PO BOX 66995 TACOMA, WA 98464

RAVALLI FAMILY MEDICINE 411 W. MAIN ST. HAMILTON, MT 59840

RIVERSIDE RADIOLOGY PO BOX 3138 MISSOULA, MT 59806

RODENBURG LAW FIRM 300 NP AVE N #105 FARGO, ND 58108

RURAL METRO
PO BOX 749667
LOS ANGELES, CA 90074

SOLE STONE PO BOX 1359 MISSOULA, MT 59806

TACOMA EMERGENCY PO BOX 661448 ARCADIA, CA 91066

TRA-MINW PS PO BOX 2429 INDIANAPOLIS, IN 46206

WELLS FARGO PO BOX 51193 LOS ANGELES, CA 90051